TOTAL METHO Ch X De	POP PAYMEN CK Credit Cosit Account Depo	T (check all card indicated be dditional fee 37 CFR 1.16	See 37 CFR 1.2 (\$) 1,190.0 that apply) Money Order ther: 18-0013 or account, the Delow (s) or underpay	7 Non Deposit Accordirector is	ount Name:	wentor e t No. (please ide Rade	r, Fishman & Gr	nton, Jr.	
TOTAL METHO Ch X Dep FEE C. 1. BASIO Applica Utility Design	pplicant claims small AMOUNT OF PAY D OF PAYMEN ck Credit Cosit Account Depo or the above-ident x Charge fee(s) x Charge any a fee(s) under	T (check all card indicated be dditional fee 37 CFR 1.16	See 37 CFR 1.2 (\$) 1,190.0 that apply) Money Order ther: 18-0013 or account, the Delow (s) or underpay	7 Non Deposit Accordirector is	Filing Date First Named In Examiner Name Art Unit Attorney Docke Other ount Name: hereby authorize	t No. (please ide Rade	July 11, 2003 George S. Par F. C. Conley 3673 PAN-010 ntify): r, Fishman & Gr eck all that apply)	auer PLLC	
TOTAL METHO Chi X Dei FEE C. 1. BASIO Applica Utility Design	pplicant claims small AMOUNT OF PAY D OF PAYMEN ck Credit Cosit Account Depo or the above-ident x Charge fee(s) x Charge any a fee(s) under	ry 200 I entity status. I (check all Card osit Account Nuntified deposit) indicated be dditional fee 37 CFR 1.16	See 37 CFR 1.2' (\$) 1,190.0 that apply) Money Order ther: 18-0013 to account, the Delow (s) or underpay	7 0 Non Deposit Accr	First Named In Examiner Name Art Unit Attorney Docke Other ount Name: hereby authorize	t No. (please ide Rade	George S. Par F. C. Conley 3673 PAN-010 ntify): r, Fishman & Greck all that apply)	auer PLLC	
TOTAL METHO Cho X Dee FEE C. 1. BASIO Applica Utility Design	AMOUNT OF PAY D OF PAYMEN ck Credit Cosit Account Depote or the above-ident X Charge fee(s) X Charge any a fee(s) under the above identification.	T (check all card count Numbrified deposit diditional fee 37 CFR 1.16	See 37 CFR 1.2 (\$) 1,190.0 that apply) Money Order Ther: 18-0013 to account, the Delow (s) or underpay	Non Deposit Accer irector is	Art Unit Attorney Docke Other ount Name: hereby authoriz	t No. (please ide Rade	F. C. Conley 3673 PAN-010 ntify): r, Fishman & Greck all that apply)	auer PLLC	
TOTAL METHO Cho X Deg FEE C. 1. BASIO Applica Utility Design	AMOUNT OF PAY D OF PAYMEN ck Credit Cosit Account Depote or the above-ident X Charge fee(s) X Charge any a fee(s) under the above identification.	T (check all card count Numbrified deposit diditional fee 37 CFR 1.16	See 37 CFR 1.2 (\$) 1,190.0 that apply) Money Order Ther: 18-0013 to account, the Delow (s) or underpay	Non Deposit Accer irector is	Art Unit Attorney Docke Other ount Name: hereby authoriz	t No. (please ide Rade	3673 PAN-010 ntify): r, Fishman & Greck all that apply)		
TOTAL METHO Cho X Deg FEE Co 1. BASIO Applica Utility Design	DOF PAYMEN Ck Credit Cosit Account Depote or the above-ident Charge fee(s) X Charge any a fee(s) under the above ident control or the above ident in the above iden	T (check all Card sist Account Num tified deposit indicated be dditional fee 37 CFR 1.16	that apply) Money Order Ther: 18-0013 or account, the Delow (s) or underpay	Non Deposit Accer irector is	Attorney Docke	(please ide Rade	ntify): r, Fishman & Greck all that apply)		
METHO Cho X Deploy FEE Co 1. BASIC Applica Utility Design	osit Account Depo or the above-ident x Charge fee(s) x Charge any a fee(s) under	T (check all Card sit Account Nun tified deposit) indicated be dditional fee 37 CFR 1.16	that apply) Money Order ther: 18-0013 or account, the Delow (s) or underpay	Non Deposit Acci	e Other	(please ide Rade	ntify): r, Fishman & Gr eck all that apply)		
FEE C. 1. BASIC Applica Utility Design	osit Account Depo or the above-ident x Charge fee(s) x Charge any a fee(s) under	Card count Number of Account N	Money Order ther: 18-0013 ct account, the Delow (s) or underpay	Deposit Acc	ount Name:	Rade	r, Fishman & Gr		
FEE C. 1. BASIC Applica Utility Design	osit Account Depo or the above-ident x Charge fee(s) x Charge any a fee(s) under	posit Account Nun tified deposit indicated be dditional fee 37 CFR 1.16	t account, the Delow (s) or underpay	Deposit Acc	ount Name:	Rade	r, Fishman & Gr		
FEE C. 1. BASIC Applica Utility Design	cor the above-ident Charge fee(s) Charge any a fee(s) under	tified deposit) indicated be dditional fee 37 CFR 1.16	account, the D elow (s) or underpay	irector is	hereby authoriz	ed to: (ch	eck all that apply)		
FEE C. 1. BASIC Applica Utility Design	x Charge fee(s) x Charge any a fee(s) under	indicated bo dditional fee 37 CFR 1.16	elow (s) or underpay						. 60
1. BASIO Applica Utility Design	Charge any a fee(s) under	dditional fee 37 CFR 1.16	(s) or underpay	ment of	Char	ge fee(s) ii	ndicated below o		. 611
Applica Utility Design	fee(s) under	37 CFR 1.16		ment of			idicated below, ex	xcept for the	tiling fee
Applica Utility Design	LCULATION				x Credi	t any over	payments		
Applica Utility Design	FILING, SEARCH						 		
Utility Design		1, AND EXA	MINATION FEI	ES					
Utility Design		FILIN	NG FEES	SEA	RCH FEES		NATION FEES		
Design	tion Type	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fee (\$	Small Entity Fee (\$)	Fees Pa	aid (\$)
_		300	150	500	250	200	100		
_		200	100	100	50	130	65		
		200	100	300	150	160	80		
Reissu	;	300	150	500	250	600	300		
Provis	onal	200	100	0	0	0	0		
2. EXCE	S CLAIM FEES					-	-	S	mall Entity
Fee Desc								Fee (\$)	Fee (\$)
	m over 20 (includ	-	•					50	25
	pendent claim ov	er 3 (includi	ing Reissues)					200	100
Multiple	dependent claims							360	180
Total C	<u>Extra</u>	Claims	Fee (\$)	Fee P	aid (\$)	<u>r</u>	Multiple Depende	nt Claims	
5	- 74 =	× _				<u> </u>	<u>ee (\$)</u>	Fee Paid (\$)	
	est number of total cla								-
Indep. 0		Claims _	Fee (\$)	Fee P	aid (\$)				
HP = biol	6 = est number of indepen	dent claims col	id for if greater than	0.3					
	CATION SIZE FEE	•	o ioi, ii gicalei lila	., 5.					-
	ecification and dra		ed 100 sheets o	f paper (excluding elect	ronically	iled sequence or	computer	
listir	gs under 37 CFR	1.52(e)), the	application siz	e fee du	e is \$250 (\$125	for small	entity) for each ac	ditional 50	
shee	s or fraction there	of. See 35 U	J.S.C. 41(a)(1)	(G) and (37 CFR 1.16(s)				
<u>Tota</u>		xtra Sheets			dditional 50 or fra			Fee Pa	<u>aid (\$)</u>
	- 100 =		/50		(round up to a wh	ole number) x :	=	
4. OTHE		# · * * -	,					Fees P	aid (\$)
	nglish Specificati					ourth	nth	705	: 00
Other	(e.g., late filing su				ponse within f inued examina			795 395	

SUBMITTED BY	-		L_{-}	$\overline{}$	 			
Signature					Registration No. (Attorney/Agent)	24,104	Telephone	(202) 955-3750
Name (Print/Type)	Ronal	P. Kana	men				Date	August 22, 2006